

**2014 MINE RESCUE, FIRST AID, BENCH AND PRESHIFT RULES**  
**QUESTIONS AND ANSWERS**

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## 2014 MINE RESCUE Q&A

Q: A card-#7, this rule states that the command center attendant will be an "employee of the company". Are we referring to the mine rescue team or a particular company?

A: The Command Center Attendant may be one of the team members referred to in Rule 1 of the Rules Governing 2014 Mine Rescue Contests, the team's trainer or an employee of the teams company or mine rescue association being represented in the contest. (Mine rescue association means the group, composite, or contract team that is providing PART 49 COVERAGE for the mine/company.) As per Rule 7, the attendant must be a full time employee of one of these entities. This is how this rule will be applied at the 2015 National Contest. Local contest directors will have the discretion to determine how the attendant complies with Rule 7 and either allow or disallow the team to use that particular attendant based on their association with the team.

Q: Is running now permitted?

A: Yes, however if the team destroys the field (i.e. overcast walls, rib stands, etc.) then they will be docked under rule 49. Also, if the lifeline judge isn't able to keep up with the team, then they will be responsible for their own lifeline.

Q: Under the new rule 36, paragraph #4, it states that in irrespirable atmosphere the captain will open the outer door and close it, take another gas reading to determine if the atmosphere is respirable or irrespirable. If it is irrespirable use the purge valve for 5 seconds and take another gas check to determine if the atmosphere is respirable, and if it is open the inner door. So unlike paragraph #3 the captain is not required to take the gas test AT the inner door if the atmosphere is irrespirable?

A: Yes, a gas test is required inside the airlock. Captain does not have to say "at the inner door", as long as a gas test is taken within the airlock.

Q: How do you transport a patient with life threatening bleeding?

A: Once team verbally assess the patient and verbalizes the critical skill treatment for life threatening bleeding and applying the necessary bandage in place, then the bleeding will be considered to be controlled and can be transported at this point.

Q: Will the E-map be available at the time of protest? How can the protester be able to prove that it was on the E-map?

A: A paper copy of the E-map will be printed out and included in the team's packet when the team goes to protest.

Q: Applying a dressing to wound (cover entire wound), do you need to apply a cover dressing in addition to 4" gauze bandage?

A: The bandage(s) must be secured with a roller bandage such as Kerlex or equivalent. If the bandage comes off while transporting the patient, then the team will be discounted under rule 34.

Q: Is triangular bandage considered equivalent to Kerlex?

A: YES

Q: Are life threatening bleeding placards going to be in Red Letters like first aid?

A: They do not have to be. It is up to the local contest.

Q: Define moving the patient while patient is in an irrespirable atmosphere? Can team move patient from elongated unsafe after timbering or place under O2 prior to removing from unsafe?

A: Patient must be placed under O2 prior to moving out of unsafe, therefore sufficient timbers must be provided to do so.

Q: Rule 27 states that a "date, initial and team number" must be marked at "DOORS" or refuge alternative? Both doors? Outer or inner?

A: Team must only date and initial the OUTER door. A team number is not required at the door of a refuge alternative.

Q: Stated in rule 23 paragraph 8, it says "roof tested of a fire at an intersection must be perpendicular and from imaginary line to imaginary line. However, a zigzag roof test will be acceptable as an alternative test on subsequent trips through the fire area if a diagonal ventilation structure has been installed. Since the initial test prior to extinguish the fire in an intersection stated in rule 23 (paragraph 7) says test must be perpendicular to direction of travel and (paragraph 8) says, If there is NO ventilation structure installed in the intersection than a zigzag under the rule is not an alternative or is it?

A: No, a diagonal must be installed for alternative test.

Q: If a placard is labeled "person" and the captain turns it over and finds that the person is identified as a "body" are there 2 placards that need to be identified, X or person symbol?

A: Rule 5-J "the proper symbol shall be used in conjunction with the original X.

Q: Under the new rule #10, since there will be no discount for this exercise, except for refusal to participate. Can a factory rep. observe this portion of the exercise to conserve on trained judges?

A: Yes, however the local contest chief judge can make such decision.

Q: If a team does a vent change and then short circuits air in the fresh air base, will air continue to migrate inby the fresh air base?

A: NO, unless there is an opening inby the fresh air base that is not blocked.

Q: Explain the difference in rule #24 and rule #25. Rule #24 discount 5 at location and #25 discounts 2 for improper test, not to exceed 6 points per team member during the working problem?

A: Rule 24 is WHERE to take gas check and Rule 25 is HOW to take a gas check.

Q: If the team breaches a stopping, permanent or temporary, and builds it back in the same place, is a roof check required?

A: No, rule 23 states RR tests required prior to building a temp stopping, not rebuilding a ventilation control (unless rebuilding a stopping that is completely destroyed).

Q: If team travels through a stopping multiple times and only 1 side of the stopping comes down, does team have to have a roof and rib check when building it back?

A: No

Q: When a permanent stopping is torn down and rebuilt, how do you map it?

A: 5(m)-any removal of such structure will be reflected by a notation such as REMOVED. If rebuilt in the same location, a notation, such as REBUILT, will

suffice.

Q: For the extent of gases on page 46, figure 4, this statement states immediately outby. Would it not be easier to read UP AGAINST THE CONDITION, because how far is immediately outby?

A: Immediately outby means up against.

Q: Under rule #36, paragraph 3, states respirable atmosphere that the captain will take a gas test AT the inner door of the RA. Is that where it must be taken of within 5 feet of the inner door?

A: Yes, anywhere inside the airlock.

Q: Does an irrespirable gas follow the captain into the purge chamber of an RA?

A: No, an additional gas check must be taken inside the airlock to determine if respirable or irrespirable. A placard must be inside the airlock to show an irrespirable atmosphere. If irrespirable the team must purge for 5 seconds, then re-test inside the airlock.

Q: Can a patient inside an RA have life threatening bleed? How can they be treated and removed?

A: No, for this year, no life threatening bleeds will be inside RA's.

Q: Is the intention of rule #36 for whenever an RA is encountered it is to be entered whether there is an irrespirable present or not?

A: Not necessarily, if the team gets no response the team may continue to explore. If all persons are accounted for, then the team doesn't have to enter at all.

Q: Can there be more than one patient with life threatening bleeding in a problem?

A: NO

Q: Regardless of being able to ventilate an RA if you have a response from inside, are you committed to get him out?

A: Yes, for contest purposes under rule 36, all RA's will be proper working to and including the purge valve for a proper airlock inside the chamber.

Q: Can the life threatening bleeding placard be hidden (found by team while loading patient) or does it have to be obvious when team first encounters?

A: No, must be on the patient and visible for teams.

Q: At what point in the patient assessment are gloves required? Can the captain touch the patient and date/initial?

A: The captain can touch for date/initial without gloves; gloves (any type) must be worn when conducting the critical skills related to controlling bleeding.

Q: What kind of gloves is required for life threatening bleeding?

A: Any type of gloves.

Q: If the dressing or bandage falls off/knocked off while transporting a patient with life threatening bleeding, will this be a discount?

A: Yes

Q: If a patient is found in low O2 and with life threatening bleeding, which one is priority?

A: Either/or, as long as both are done prior to moving patient.

Q: Will the old Q & A's be valid for interpretation?

A: No, the old Q&A's will be removed from website.

Q: Will SD card given to teams have map and symbols loaded onto it or will team have to load symbols?

A: The SD card will have the map and symbols pre-loaded.

Q: Why do teams have to wear headsets or an ear plugs? Shouldn't be any added interference?

A: The purpose is to eliminate extra noise/distractions for the BO, the superintendent, and the command center attendant.

Q: Can BO opt out of using monitor/computer and still use the Command Center Attendant?

A: The monitor/computer that will be located at the BO station will only show what the Command Center Attendant is drawing. It is only for the BO to observe. It will be up to the local contest director as to whether the BO can opt out of having the monitor/computer at his/her station.

Q: Is a LIVE MAN on a placard the same as LIVE PERSON? No symbol for LIVE MAN?

A: Problem designers should put the proper wording on placards that relate to a symbol in the legend.

Q: The extend of gas sketch (figure 4-page 46) shows the gas placard in #2 entry extending into the unsafe roof. Stated in the rules, if this gas placard was just in by the FAB (#2 entry), it would still extend into the unsafe roof. WHY? Rule 24B states a gas check is required at that location?

A: 24B refers to intersections; the figure 4-page 46 is only required one test in the entry, prior to traveling around to backside of the unsafe, which would then require another test.

Q: How do you map 3 physical timbers with a placard that states 3 TIMBERS?

A: X – 3 TIMBERS

Q: Will the judge tell the team when bleeding is stopped?

A: No, once the skill sheet assessment has been performed (verbalized) the bleeding is considered to be stopped.

Q: When a stopping (not intact) is found and it is rebuilt will team need to draw a line or just write rebuilt?

A: The stopping will be considered temporary under 5-N. If left intact, a line must be drawn on the map.

Q: How do you map an overcast completely destroyed? Use symbol and write out completely destroyed or use an X?

A: Team must use the symbol in the legend, and write out completely destroyed.

Q: Can a conscious person walk out of mine after team controls life threatening bleeding? If the bleed is on the leg, how can the extremity be elevated and walk out at the same time?

A: Yes, once bleeding is controlled under skill skeet, the conscious person may walk to FAB. The extremity must be elevated only during the treatment of the bleeding.

Q: Rule 23 – If an inextinguishable fire is located in the center of an intersection with multiple openings, and the team encounters the fire from an outby approach such as advancing up #1 entry. Once the initial roof and rib test are made outby the actual fire area as described in Rule 23 paragraph #7 and the team advances around and approaches the same inextinguishable fire from the crosscut from #2 entry, where is the second roof and rib test made? In the intersection as close to the fire as possible, or at the imaginary line from #2 entry since the initial roof and rib test was perpendicular to the fire?

A: The second test would be made as close to the fire as possible, perpendicular to direction of travel.

Q: Rule 36 – For the Strata Safehaven, now if you need to purge while inside the airlock, you leave the outer door partially open. Rule 36 states to close door. What should the team do?

A: For contest purposes, the outer door must be closed when purging the airlock when an irrespirable atmosphere is located outside the RA. Problem designers should not distinguish RAs with a certain brand/company name.

Q: Rule 34 – Do critical skills have to be verbalized or just performed?

A: The critical skills should be verbalized.

Q: Rule 34 – If elevation is required, does it have to be maintained when loaded on a stretcher?

A: No, the elevation is required only when administering first aid (performing the critical skills).

Q: Legend – For a placard that states “Temporary Stopping Not Intact”, does “Not Intact” have to be written beside symbol?



A: No.

Q: Legend – For a placard that states “Conscious Live Person”, does “Live Person” have to be written beside symbol?

A: No.

Q: Rule 12 – For initial assessment, is it two (2) docks per patient or two (2) docks per individual check? (Asking if ok, checking carotid pulse, control bleeding, etc.)

A: 2 points per patient, no matter how many checks are not conducted.

Q: Rule 35 – Can a team breach a stopping with an irrespirable atmosphere immediately outby the stopping if no verbal contact is made?

A: Yes. (Teams must still comply with Rule 43 about airlocks.)

Q: Rule 34 – If patient is in unsafe roof and has life-threatening bleeding, can patient be moved from unsafe roof before treating?

A: For 2014, problem designers are not to have a patient under unsafe roof with life-threatening bleeding.

Q: Rule 36 – After exiting the RA in a smoke-contaminated atmosphere, how long do the 2 team members have to return to the lifeline, immediately or before the next advance?

A: Immediately. However, if the team members are carrying an unconscious person out of the RA, they will be allowed to place the patient on a stretcher before returning to the lifeline. The stretcher should be placed so the patient can be placed on it as soon as both team members are out of the RA.

Q: Rule 7 of A Card – Can a team just complete the command center attendant map and not turn in a Briefing Officer map, since the command center attendant map could take all discounts off.

A: No. The teams must turn in a completed Briefing Officer map.

Q: Does the Q and A from the last two years still apply?

A: No. Only the Q and A from this year may be used to supplement the rules.

Q: Rule 34 – Does everyone who loads/touches a patient with life-threatening bleeding need to wear gloves?

A: No. Gloves are only required when conducting the critical skill treatments to control the bleeding. Once it is controlled and bandaged, gloves are no longer necessary. Similarly, the captain can touch the patient without wearing gloves, and the initial assessment can be conducted without wearing gloves.

Q: Rule 36 – Do you have to D & I at both outside and inside RA doors?

A: No, only the outside door.

Q: Rule 7 of A Card – Is it foreseen that the command center attendant will be mandatory in the future?

A: As technology develops and teams are more exposed to this, most likely it will be mandatory in the future.

Q: Rule 7 of A Card – There are 3 different RA symbols in the Visio legend, but only 1 in the rules legend. If the B.O. map has a discount on the RA (wrong location, door in wrong orientation, etc.) will any of the 3 Visio RA symbols (if in correct location, orientation, etc.) remove the docks from the B.O. map?

A: For convenience, the 3 symbols were developed. However, by rule, the RA symbol and door must be in the correct location and orientation. The door on the RA symbol in the Visio legend can be moved.

Q: Rule 7 of A Card – Is the command center attendant map subject to the same mapping rules as the B.O. map?

A: The items that must be mapped on the command center attendant map are the same items that must be mapped on the B.O. map.

Q: Rule 34 – How will the team know that the patient has a spinal injury?

A: There will NOT be any spinal injuries to patients in the 2014 contest year.

Q: If a conscious patient has a life-threatening bleed, does he/she have to be taken out of the mine on a stretcher, or can he/she walk out?

A: By rule, the conscious patient can walk out. Problem designers can require it in written problem that any patients with life-threatening bleeding must be brought out on a stretcher. (If that is the case, problem designers must not have two patients in the same location that must be brought out on a stretcher.)

Q: Will patients with life-threatening bleeding need to have their condition noted on team and B.O. maps?

A: Whatever is on the placard must be mapped on the team map. Problem designers must put information about life-threatening bleeding on a placard. The information on the label on the patient does NOT have to be mapped. (Orientation, verbatim, and the six foot tolerances do not apply to the B.O. map.)

Q: Rule 24 – Define the difference between normal gas testing location and required gas testing location.

A: Under the previous version of the rules, normal areas were defined in paragraph A. However, other paragraphs required gas tests in different locations. The rules committee added “/required” in an effort to make the extent of gases more clear so teams would know which gas tests stopped a gas and when gases would continue. All normal areas to be tested are considered required areas to be tested.

Q: Rule 34 – If a patient with a life-threatening bleed is found in an irrespirable atmosphere, which condition must be addressed first? Can they be addressed at the same time?

A: The rules do not require one condition to be addressed before the other. However, both conditions must be addressed before the patient is moved. And yes, the team can put the patient under apparatus at the same time the bleeding is being controlled. (Teams should be careful that someone putting the apparatus on does not touch the bleeding area without gloves on, or not have an unconscious patient assist in some way, etc.)

Q: Rule 12 – Do you have to verbalize checking for carotid pulse?

A: Yes.

Q: Rule 36 – If the air inside an RA airlock remains irrespirable after purging, is the team required to try purging again, or go in and consider the atmosphere impossible to ventilate?

A: The purge valve will work and the atmosphere cleared after one attempt. There will NOT be any damaged doors or purge valves in RAs during the 2014 contest season.

Q: Rule 36 – If the atmosphere outside of the RA is respirable and the captain opens the door, takes a gas test and the airlock area is respirable, can the team just ask the patient to step out of the door?

A: No. Team must go into the inner chamber (to take gas test and D&I patient/bodies).

Q: Map legend – For Caved and Unsafe Roof, the legend symbols show two sets of X's and two sets of solid and dashed lines for the listed conditions. Does this mean it would take 4 sets of X's to indicate the inby and outby sides of a caved area, or 4 sets of solid and dashed lines to indicate the inby and outby sides of unsafe roof?

A: No. Teams should show one row of X's or one row of solid and dashed lines for each side of the caved area or unsafe roof.

Q: Map legend – The gas symbol in the legend shows a line in front of each of the three constituents. Are the lines required on 1) placards; 2) team map; and 3) BO map?

A: No, the actual numbers must be shown all three. The lines are just for reference.

Q: Rule 37 requires the atmosphere for the BO to remain respirable. Will the command center attendant location be a non-issue as far as ventilation routing?

A: Yes. The command center will be considered to be outside the mine as a remote location (even if in a block on the field).

Q: How is the 6' tolerance measured? Is it a 3-foot radius from the center of the object, or a 6-foot radius from the center of the object?

A: A 6-foot radius from the center of the object.

Q: Can the symbol stencil icons be altered by size or color for visual enhancement for the command center attendant map?

A: If they alter the size of the icons then the 1:10 ratio would not be maintained, as for color this would require changing the stencil set, but anything that they type in

they can color and change the font size as they wish.

Q: Rule 25 –Can you say checking for methane, carbon monoxide, and oxygen, then swipe your detector after you verbalize to judge what you are doing?

A: No. The rule states that the team member shall verbalize each test.

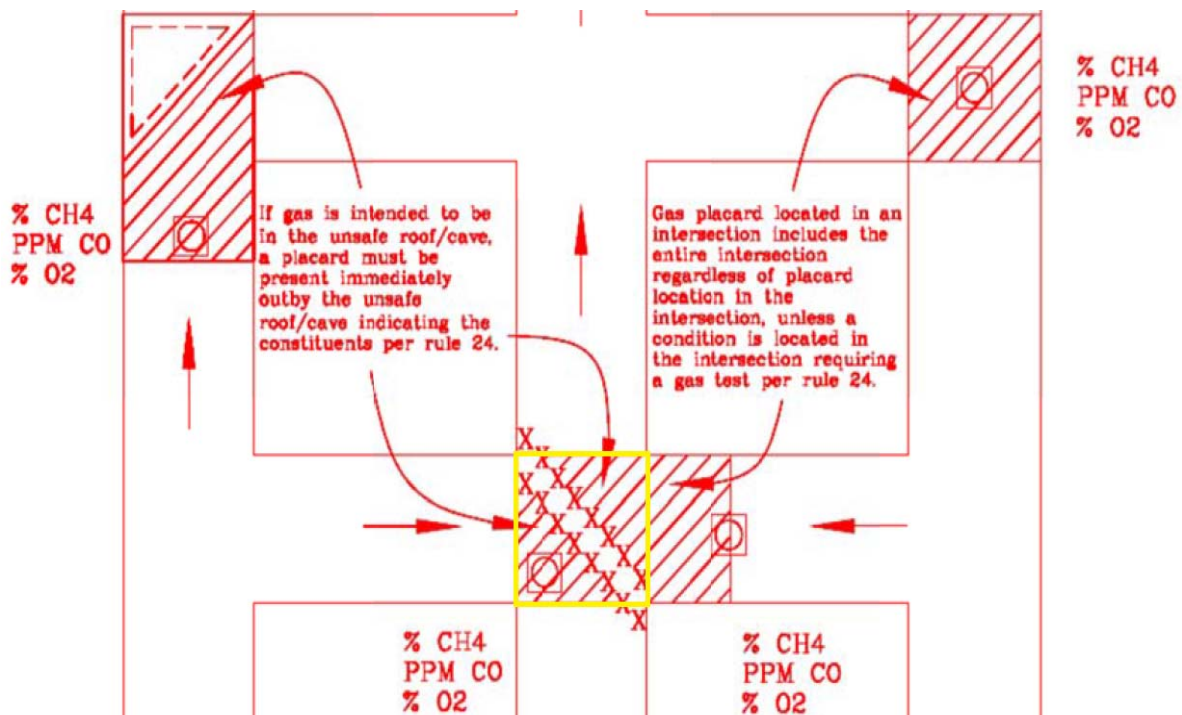
Q: Rule 12 – (First Aid Supplies) - What type of gloves are required or can be used?

A: The rules do not require any specific type of gloves. Any type gloves will be acceptable.

Q: Rule 6 of A Card – Since 6' tolerance does not apply to BO map, does the RA and live person symbol have to be in the RA?

A: The legend states the “RA” can be outside the symbol for the RA. The person/body symbols must be inside the RA symbol.

DRAWING #1-HIGHLIGHTED AREA: FIGURE 4 – EXTENT OF GASES-PAGE 46



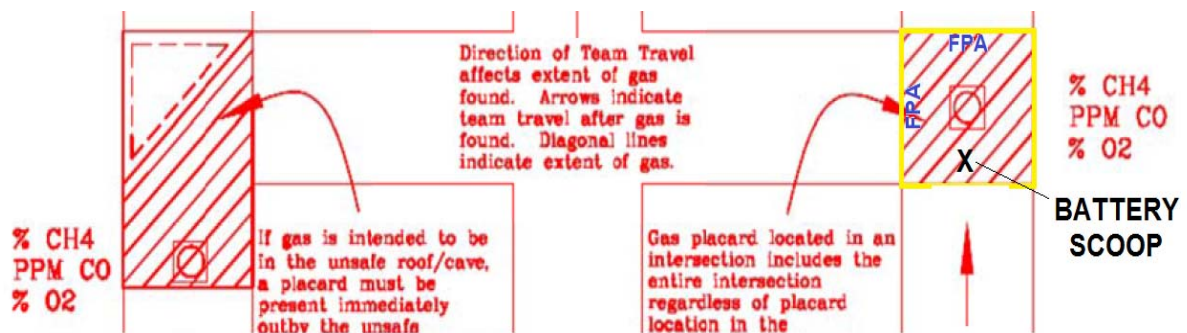
Q: Drawing #1: If the team has already made it into the intersection from the one side of the caved roof and made the required gas test would a gas test be required when the team entered the intersection. The reason for the question is the rules require a gas test if the openings are blocked when the team enters the intersection, but once the initial gas test is made and the team enters from the opposite side the openings are not actually blocked anymore because the team has been on the other side.

A: A gas test is still required by Rule 24B when the teams encounter the condition that prevents them from checking the openings on the other side, even though the teams have already been there.

Q: Drawing #1: If there was an explosive mixture on both sides of this intersection and the team ultimately is required to make a gas test on both sides as shown, is there ever a way to clear the explosive mixture.

A: No. No matter which way the team tried to send air, it would travel into/over an unexplored area.

DRAWING #2-HIGHLIGHTED AREA: FIGURE 4 - EXTENT OF GASES-PAGE 46



Q: Drawing #2: If the team travels into the highlighted area as indicated on this map and finds a Battery Scoop in the intersection with an explosive mixture, would this be the proper way for the captain to FPA???

A: If team enters the intersection from outby in the #3 entry, when the captain reaches the gas placard, it becomes a withdrawal situation. No one can go inby the gas placard, so the FPA should be parallel to the gas placard.

Q. If a gas placard touches a caved area; can the gas go through the caved area?

A. The extent of a gas depends on direction of team travel. If the team cannot reach a gas placard leading to a caved area from any other direction, the gas will continue through the caved area.

Q. If a gas placard does not touch a caved area, can the gas continue through the caved.

A. The extent of a gas depends on direction of team travel. If the team cannot reach a gas placard leading to a caved area from any other direction, the gas will continue through the caved area.

Q. Is an RA a location that needs explored according to rule #45 for the two crosscut limit? The RA is now accessible when the team finds them during exploration. The rules say it is not an area but it is still unexplored.

A. The RA does not have to be entered in this situation, and is not considered an area for systematic exploration purposes.

Q: How do you map life threatening bleeding?

A: Problem designers are instructed to put the condition concerning bleeding on the placard for the live person. Thus, teams will use the symbol for a live person and write out anything concerning the live person's condition.

Q: When elevating extremity, does this have to remain elevated while transporting and at what point can the extremity be lowered?

A: No, once critical skill (rule 34) is complete, extremity may lowered and patient transported.

Figure 4 Extent of Gas

Q: In the figure the gas that is in #2 before the 1<sup>st</sup> crosscut, the gas is not touching the unsafe, however the extent is to the backside of the unsafe. The gas that is in the 2<sup>nd</sup> crosscut in the #2 entry (to the left of the caved) that gas is not touching the caved and the extent is not going to the backside. Which is correct?

A: Both are correct. The extent of gases depends on direction of team travel and normal/required locations of gas tests. In the first example, since the team cannot travel through the unsafe roof, the next normal/required area to be tested is on the backside of the unsafe roof. Since no placard is there, the gas stops at the end of the

unsafe roof. In the second example, the gas will fill the entire intersection unless there is a condition that would require a gas test. Since the caved area blocks the team from taking a gas test in two of the openings, a gas test is required at that condition. Since there is not a placard there to extend the gas, it ends on the outby side of the caved area.

Rule 36

Q: It appears that the only way (by rule) to have a Purge Valve Situation on an RA is if the atmosphere outside the RA is irrespirable – There is nothing under the 2<sup>nd</sup> paragraph that mentions purging – This is the “if the atmosphere is respirable” Paragraph.

A: The purge valve must be used when the atmosphere inside the airlock of an RA is irrespirable, no matter what the atmosphere outside the RA is. The captain is required to take a gas test in the airlock. If the atmosphere is IRRESPIRABLE, the airlock must be purged. If the atmosphere is RESPIRABLE, the airlock is not required to be purged.

Rule 32

Q: If a team forgets to timber a body under unsafe roof at the end of a problem will they be discounted under Rule 3 pg. 3 or Rule 32 pg. 31? And this is an example there is other thing where this can happen are they going to get not finishing problem or what they forget?

A: Discount under rule 32.

Q: Rule #36 Needs Clarified? One place says Captain will make gas test another says team to take gas test Paragraph#2 and #3. Is the Captain required to take all gas checks?

A: The captain must take all gas tests inside an RA. Note: The gas test at the outer door of the RA was inadvertently left out of the new rule. Thus, no gas test is required at the outer door of an RA this year.

Q: Also you mentioned 4 gas test required at RA, No gas test as per rule #24 for the outside door. You need one to determine that the RA door is not in Irrespirable but not at the door.

A: Correct. The gas test at the outer door of the RA was inadvertently left out of the new rule. Thus, no gas test is required at the outer door of an RA this year. The test at the door of the RA was intentionally left out of the rule, because rule 24 B



already requires a test be made at each opening to an intersection. Gas tests are not required at placards within an entry or crosscut so a second test wouldn't be needed for the RA. The placard will indicate any gas concentrations at the RA.

Q: We have beaten Gloves to Death but do they need Fingers, some teams wear gloves with no Fingers?

A: The gloves used by team members treating the life-threatening bleeding must have fingers. The purpose of gloves is to protect the aid-giver; fingerless gloves would expose the aid-giver to potential harm.

Q: To provide power from the attendant's computer extension cords will be required. Who will supply them?

A: The problem designer/local contest will be responsible for power drops, extension cords, etc.

Q: Can a team be discounted for not having required 1<sup>st</sup> Aid supplies even if there is no life threatening bleeding in a problem?

A: Yes. Teams should be prepared. Just as in the First Aid contest, you must have the required supplies, even though many of them are not used.

Q: If life threatening bleeding is on leg, how can patient walk out to F.A.B. and keep leg elevated at the same time?

A: The elevation of an extremity is only required while the critical skills are being conducted. After the final dressing is in place, the extremity will not be required to be elevated any longer.

Q: On "extent of gasses" if gas might or might not continue into the unsafe roof or caved area, does another gas test need to be done at the start of that condition?

A: A gas test would be required only if it is a normal/required area to be tested.

Q: Do the same extents apply to smoke?

A: No. Smoke, by rule, will extend to a placard stating the "end of smoke" or a separation intended or indicated to be airtight. A gas test does not stop smoke.

Q: Doesn't Rule 24 E define the extent of gasses which contradicts the example on

page 46 of the red line rules in #1 entry? I.e. The gas will extend to an airtight separation or placard indicating a change. The unsafe roof is not airtight, so why doesn't the gas extend into it?

A: No. The part of Rule 24 E referred to here states that when the gasses are found "in an opening containing a separation intended or indicated to be airtight," then the gas will extend to the airtight separation or another gas placard. The rule must be read and applied in its entirety.

Q: Mine Rescue First Aid Supplies? How much of each of the individual items must a team carry? Gloves Leather or Latex, How Many? 4x4 how many? Roller bandages how many? Can there be multiply patients? If so can you reuse your supplies?

A: At least one (1) pair of gloves. At least two (2) 4"X4" gauze pads or equivalent. At least one (1) roller bandage or equivalent. There will only be one patient with one life-threatening bleed in a single problem, so supplies will not need to be reused in the problem.

Q: Mine Rescue, if a team explores the mine and conditions change, Example; Roof fall or water conditions change is that area still considered Explored? For venting over or setting up ventilation?

A: If conditions change after a team has explored an area, the problem designer must give the team ALL the information necessary to address the situation and be able to ventilate.

Q: B Card Rule 31B. What can team do when they find a withdraw situation? Can they make everything at that team stop or only where they have already been at that stop?

A: They can go to any location they HAVE ALREADY EXPLORED AT THAT STOP.

Q: Rule 34 B Card: If patient is behind a barricade and has an SCSR can team instruct the patient to don SCSR and bring him out of the mine through irrespirable atmosphere without killing patient?

A: The captain must touch the patient before he/she is moved. The team must put the SCSR on the patient. An SCSR can be used on a conscious patient.

Q: Rule 42 B Card – If airlock is required to enter barricade how far can team retreat

to get materials to build to airlock without being docked for delay? This would be only going to places that have already been explored to get build.

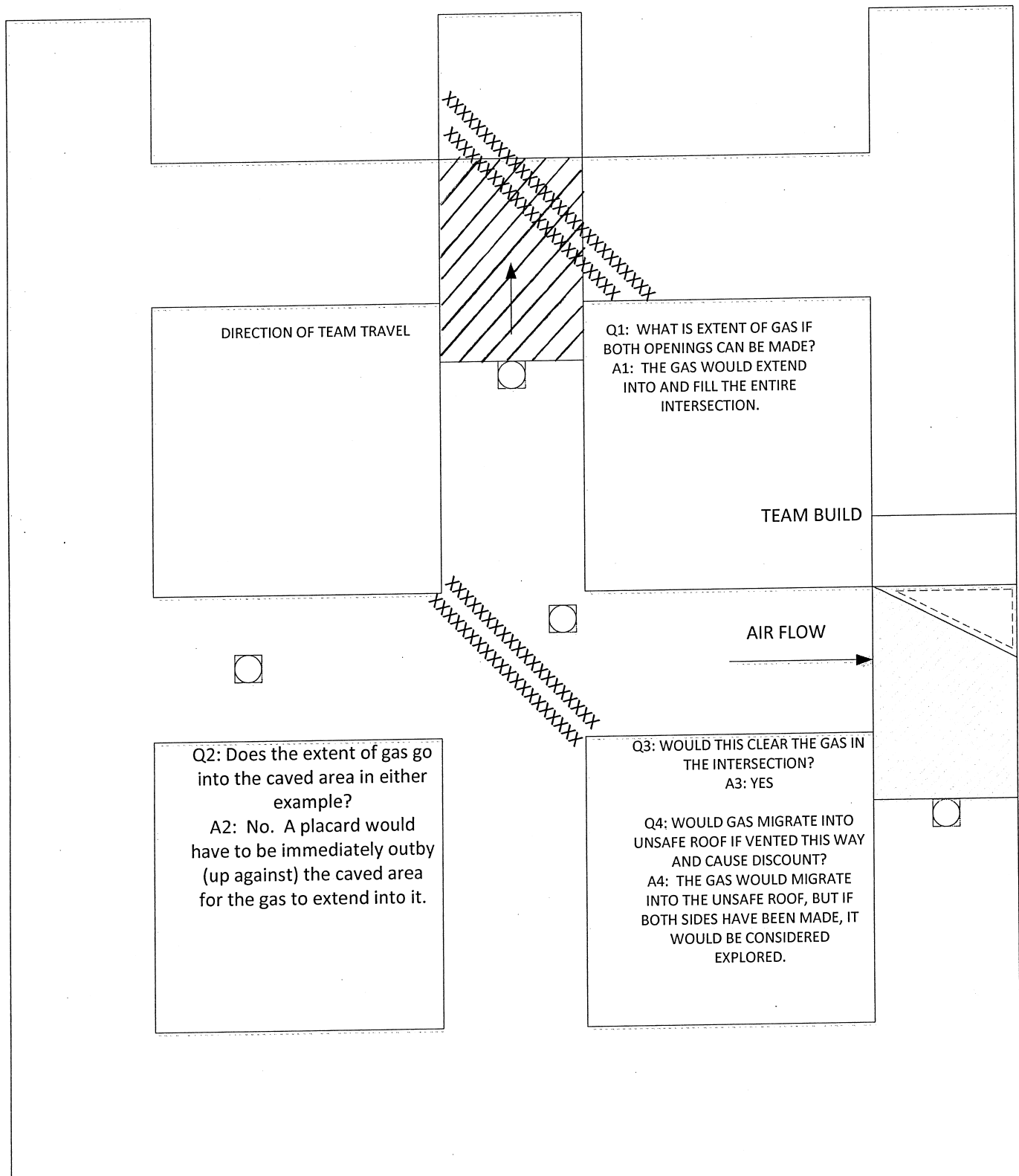
A: Rule 42 states that "Every patient shall be safely and promptly removed from the mine as soon as means and/or materials are available." This would mean that, if the team did not have building materials with them, teams must retreat to areas they have already been and as soon as they find enough building materials to airlock, they must return to the patient and recover him/her. If there were not enough building materials in areas the team has already been, the teams can advance until they find means or materials, at which time they must recover the patient.

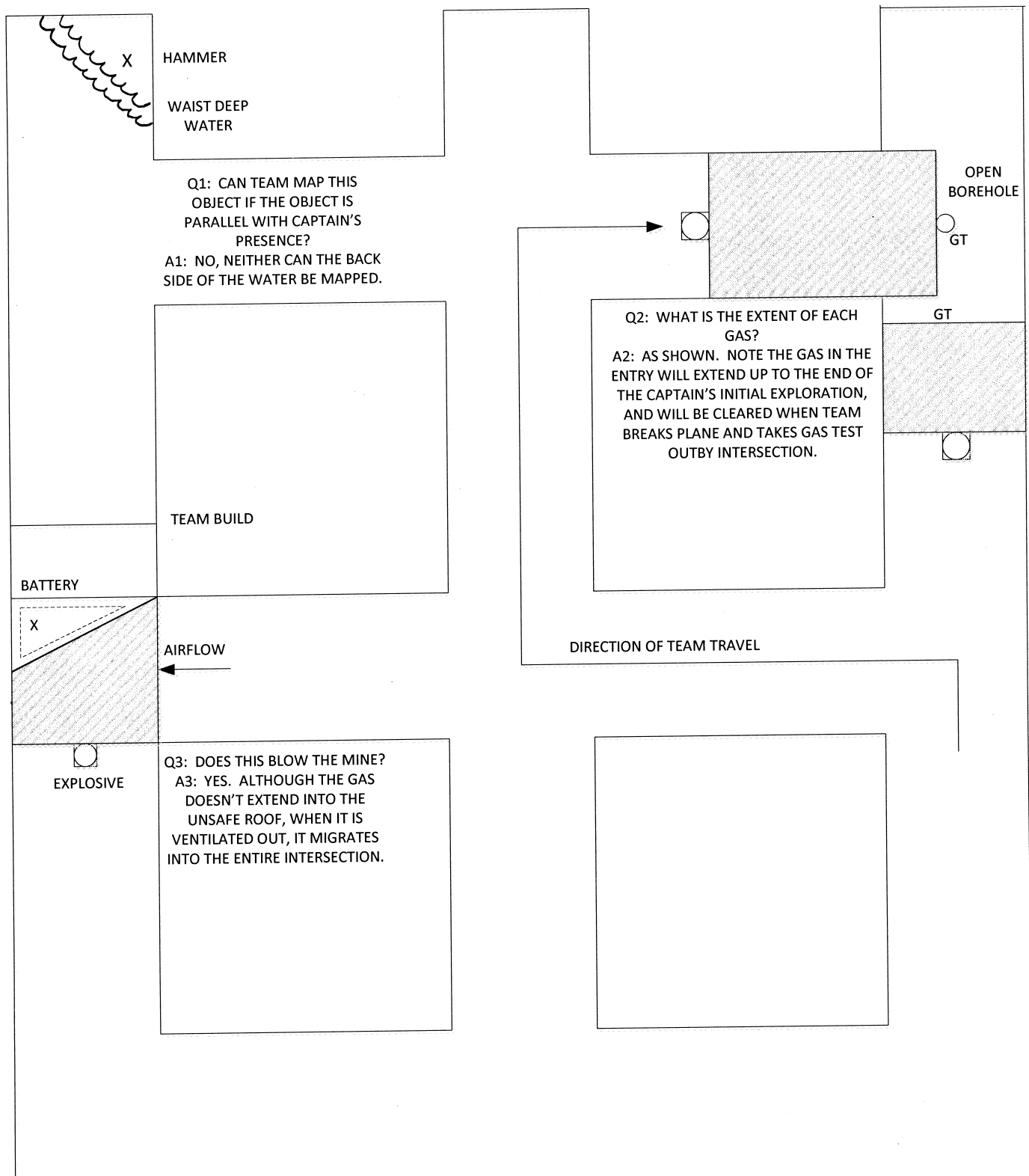
Q: B Card Rule 27 – Rule 27 says at location a date and initial on a stopping is accepted. Is it accepted to D & I on a body card? The rule reads the same for both and you can D & I on a stopping & overcast. The definition of at is near or on location.

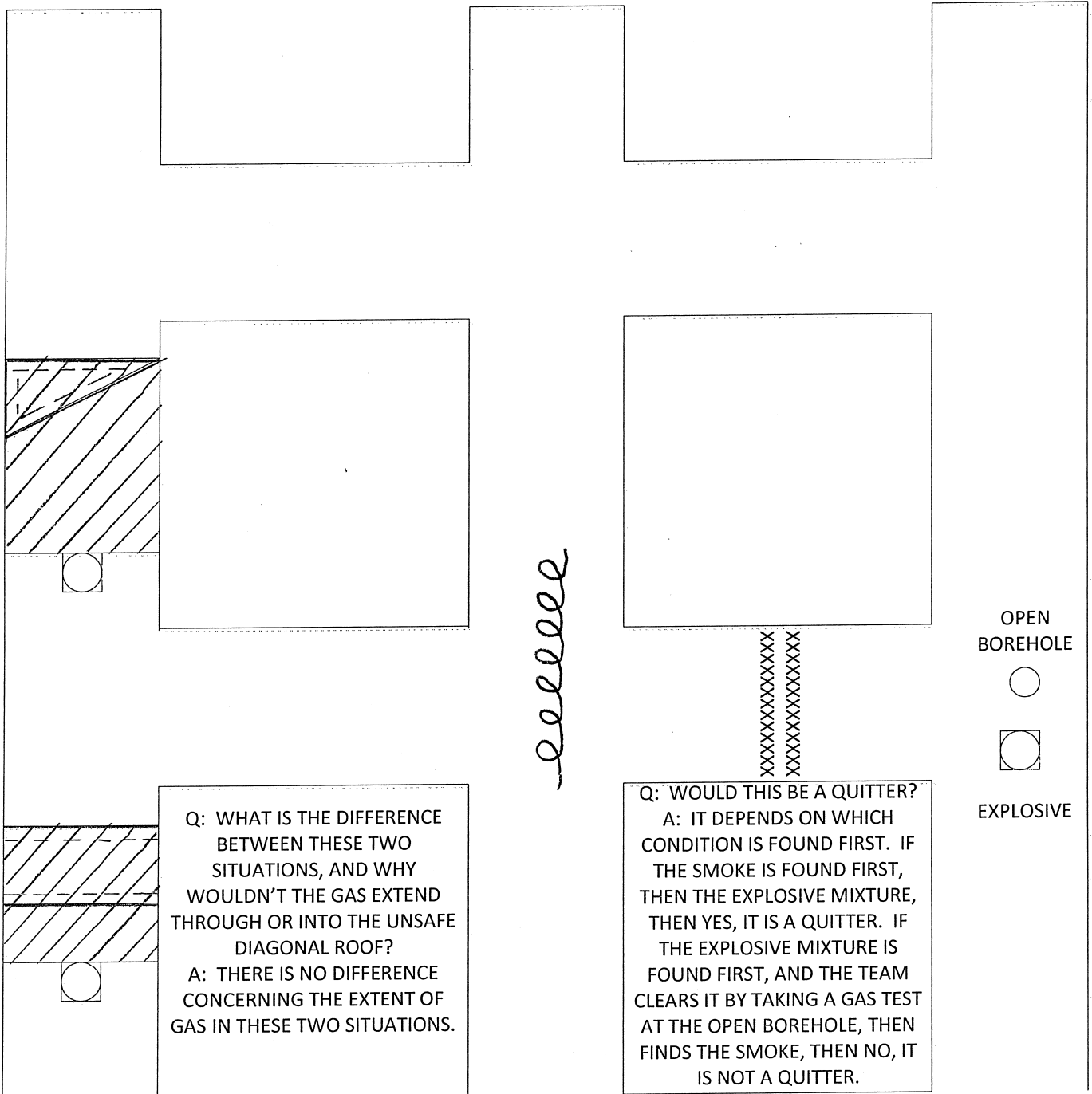
A: D & I are to be put AT a body placard, not ON the body placard

Q: A card-#7, this rule states that the command center attendant will be an "employee of the company". Are we referring to the mine rescue team or a particular company?

A: The Command Center Attendant may be one of the team members referred to in Rule 1, the team's trainer or an employee of the teams company or mine rescue association being represented in the contest. (Mine rescue association means the group that is providing Part 49 coverage for the mine/company.)







CUT INTO  
OLD WORKS



EXPLOSIVE

lell

Q: Is this a quitter?

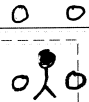
A: It depends on which condition is found first. If team finds explosive mixture first, and clears it by taking gas test at face, then finds the smoke, it is NOT a withdrawal situation. If team finds smoke first, then finds explosive mixture, it is a withdrawal situation.

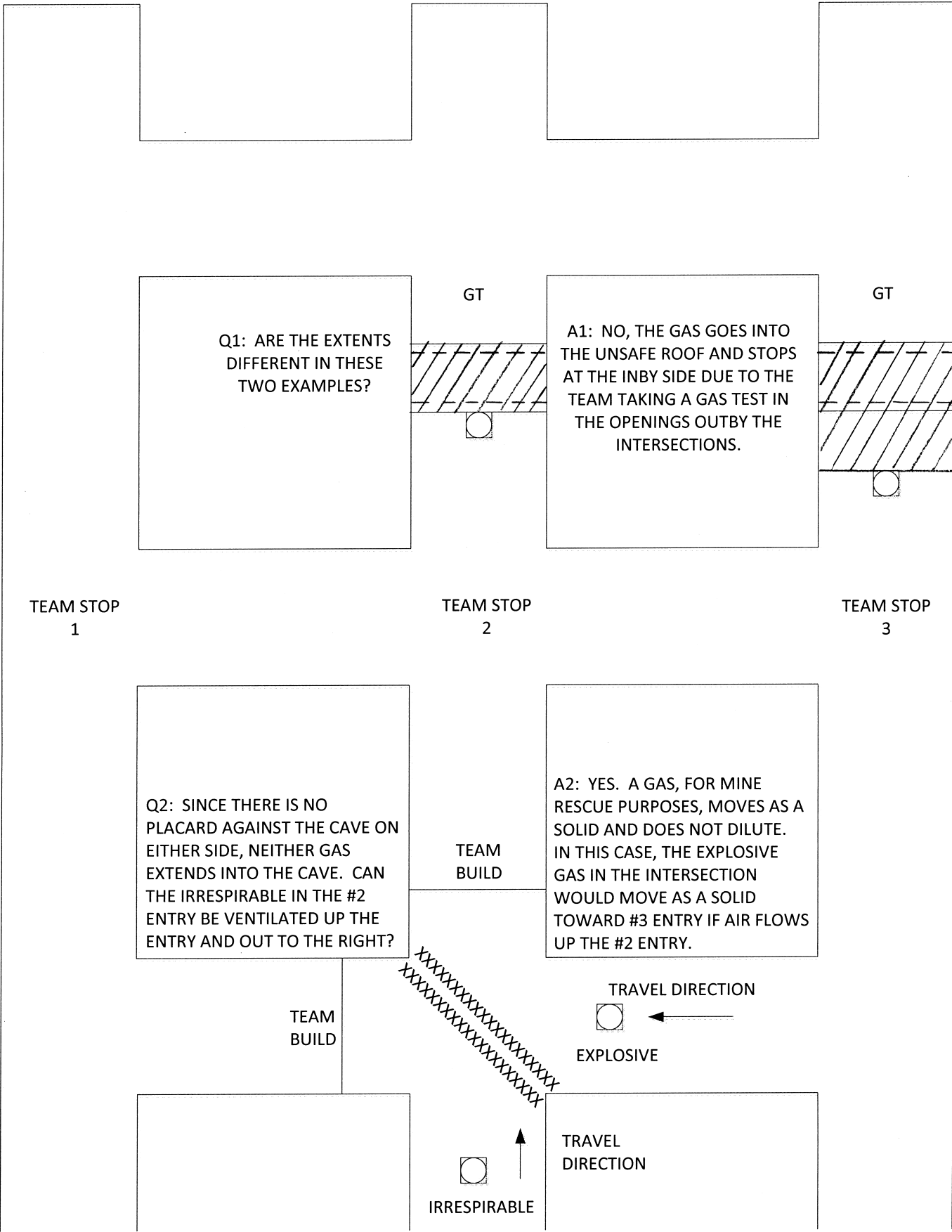
Team explores  
this side of  
unsafe roof

Team explores  
this side of  
unsafe roof

Q: Is entire  
intersection  
considered explored?  
A: Yes

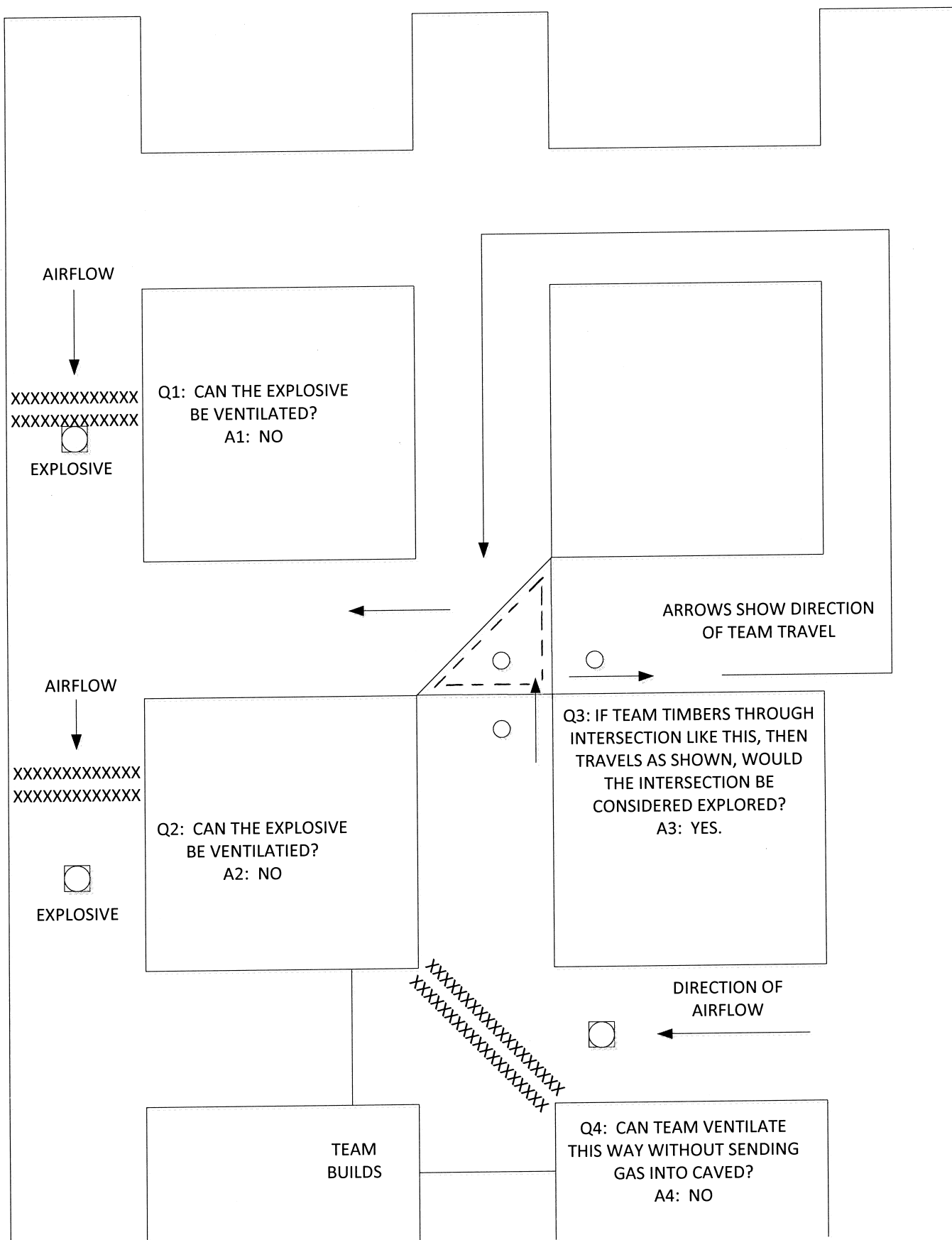
Q: How many timbers are  
required to touch this body?  
A: In this case, it would take  
a minimum of four.



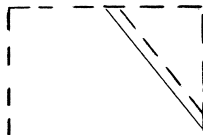








FACE

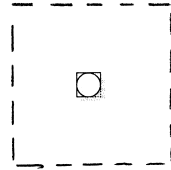


Q: ON DOTTED LINE MAP, IS  
HEADING EXPLORED? WOULD  
THERE BE A SOLID FACE ALL  
THE WAY ACROSS?

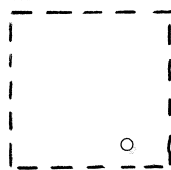
A: WHEN THE CAPTAIN  
REACHES THE FACE, THE  
ENTIRE HEADING WOULD BE  
CONSIDERED EXPLORED.

TEAM WOULD BE ABLE TO SEE  
IF THERE WAS A PLACARD  
INDICATING FACE WAS NOT  
SOLID.

Q1: CAN TEAM VENTILATE FRESH  
AIR THROUGH THIS  
INTERSECTION WITHOUT IT  
BEING EXPLORED BY TIMBERING?  
A1: YES, IT WOULD BE SAME AS  
ANY OTHER UNEXPLORED AREA.

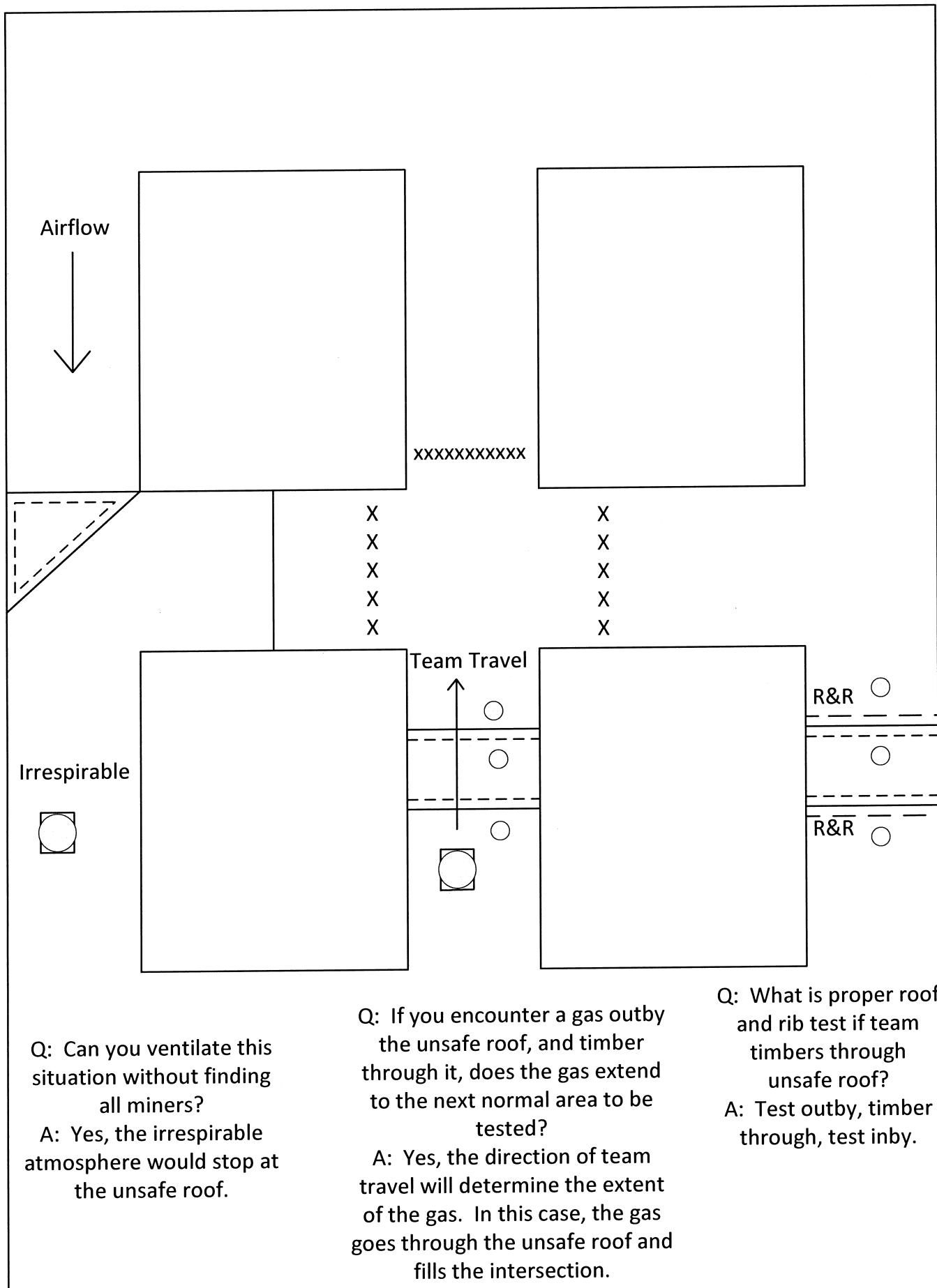


Q2: WHAT WOULD KEEP  
PROBLEM DESIGNER FROM  
PUTTING A GAS PLACARD IN THE  
UNSAFE ROOF?  
A2: PROBLEM DESIGNERS  
SHOULD NOT PUT GAS PLACARDS  
IN UNEXPLORED AREAS. THIS  
MAY HAVE TO BE DISCUSSED IN  
NEXT YEARS RULES MEETING.



Q3: CAN TEAM USE 3 TIMBERS TO  
TRAVEL AROUND A CORNER OF UNSAFE  
INTERSECTION AS SHOWN? IF YES, IS  
THE INTERSECTION CONSIDERED  
EXPLORED?

A3: YES, TEAM CAN USE 3  
TIMBERS TO TRAVEL AROUND  
CORNER. NO, THE INTERSECTION  
IS NOT EXPLORED IN THIS CASE.  
(ONLY WHAT IS PARALLEL TO  
CAPTAIN'S PRESENCE.)



**2014 BENCH Q&A**  
**BG-4**

Q: With the new rule change even if you can visually see a bug (i.e. Dosage and medium pressure lines switched) you still cannot correct deficiency until you fail a test. Is this correct?

Deficiencies seen without disassembling unit should be able to be corrected.

A: You cannot start disassembling the apparatus until it fails a test per rule #4, except for removing the plug-in coupling from the breathing hoses at the connection, the assembled BG-4 apparatus cannot be disassembled to look for problems until the hoses are attached to the tester and the apparatus fails a test.

When testing is completed on the assembled BG-4 apparatus, the hoses shall be removed from the tester, connected to the facepiece, and the back cover installed. This shall be done before the clock is stopped.

Q: With new rule change will contestant be able to remove the back cover on the unit?

A: Yes.

Q: Is removing the back cover considered disassembling the unit?

A: No.

Q: Will bench tests be designed to fail contestants such as changing the split ring to a slightly different size?

A: Bench Problems will not be designed to “trick” contestants.

Q: Rule #4 BG-4, does that mean that you can't remove the back cover unit it fails a test?

A: No.

## 2014 Pre-Shift Q&A

Q: Rule 15-A, What is defined as an ignition source? If there is a placard that says (Battery Scoop) is this an ignition source?

A: Ignition sources are defined as: Energized electrical equipment, energized circuits (including all batteries except cap light batteries) energized cables or a fire.

Q: If all index cards are pre-numbered, make the number dark so it can be seen without bending over.

A: The cards are not required by the Pre-Shift Rules to be numbered. It could be up to the contest director to require them to be numbered and if so make the numbers identifiable for the judges to see while they are laying on the ground. Furthermore the contest director could have the cards pre-numbered for the contestants and exchange those cards out with the ones the contestants are required to bring with them.

Q: Pre-Shift rule #1: Definition of a contractor? If I have contracted to train a team can I compete in the pre-shift contest?

A: As long as you are bona fide employee of a mining company or contractor and you are certified as a mine foreman or examiner. Proof of such certification must be presented at time of registration.

## 2014 First Aid Q&A

Q: Must a first-aid problem be designed where an AED must be used.

A: No.

Q: If CPR patches are used with the AED will a team be discounted for stopping CPR while placing shock pads on.

A: Follow the skill sheet.

Q: Will the AED be included in the working problem or will it be a separate skill.

A: The AED is a skill station only.

Q: Will teams be required to supply AED or will the AED be furnished by the contest as the problem design.

A: The AED should be provided as a prop.

Q: Which Model of AED?

A: This year whatever is available to the problem designer.

Q: What type or Model of AED will be used?

A: This year whatever is available to the problem designer.

Q: Will all AED's be the same for all teams?

A: The AED should be the same for all teams participating at the contest.

Q: Define sets and cycles.

A: (A cycle is 30 compressions and two (2) ventilations. A set is 5 cycles) B card rule 8.

Q: Can you use an AED skills sheets mix together need an example of how they work together?

A: Problem Design.

Q: How does CPR and AED skills sheets mix together need an example of how they work together?

A: You would do the skill given you first, then you should be given the next skill. You do not mix skill sheets in the skill stations. (i.e. one set of CPR then 2 sets of AV or...AED then two person CPR for 3 sets)

Q: Can you straddle a patient to adjust him on the backboard or tuck the blanket, would this be considered stepping across?

A: No, you cannot straddle the patient; this is the same as stepping across.

Q: Is open neck wound and abdominal wound (life threatening?)

A: Rule 2 states "Life Threatening" conditions would be considered a patient having any one or more of the following conditions: breathing difficulties, no pulse, spinal injury, skull fracture, a sucking chest wound or life threatening bleeding.